PART B - FEE(S) TRANSMITTAL

علمينا ونترج

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required).

CURRENT CORRESPOND	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.						
32294	1	iave its own cei		e of Mailing or Trans	smission		
SQUIRE, SAN 8000 TOWERS 14TH FLOOR	I S a t	I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
VIENNA, VA 22182-6212				(Depositor's name)			
							(Signature)
			Į				(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	OR	ATTO	RNEY DOCKET NO.	CONFIRMATION NO.
10/606,288	10/606,288 06/26/2003		Markku Juntti		60091.00223		3278
TITLE OF INVENTION	I: DATA TRANSMISSIO	ON METHOD, DATA T	RANSMISSION ARRA	NGEMENT A	ND BASE ST	ATION	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DI	JE PREV. PAI	D ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440 1510	\$300		\$0	\$1740	11/24/2008
EXAM	EXAMINER		CLASS-SUBCLASS			HDHAMH1 00000045	
KIM, KEVIN		ART UNIT 2611	375-350000		J 01 FC:1501 02 FC:1504		1510.00 OP 300.00 OP
	ence address or indication	n of "Fee Address" (37	2. For printing on the patent from page, ust			30.00 OF	
CFR 1.363). Change of corresp	ondence address (or Cha	nge of Correspondence	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,				
Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to				
PTO/SB/47; Rev 03-0 Number is required.	02 or more recent) attach	ed. Use of a Customer	2 registered patent attorneys or agents. If no name is 3 listed, no name will be printed.				
3. ASSIGNEE NAME A	ND RESIDENCE DATA	TO BE PRINTED ON	THE PATENT (print or	type)			
PLEASE NOTE: Un recordation as set for	less an assignee is identi th in 37 CFR 3.11. Comp	ified below, no assignee pletion of this form is NO	data will appear on th T a substitute for filing	e patent. If an	assignee is id	dentified below, the d	locument has been filed for
recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Nokia Co:	rporation		Espoo,	Finlan	id		
Please check the appropr	riate assignee category or	categories (will not be pa	rinted on the patent):	☐ Individual	Corporati	ion or other private gr	oup entity Government
4a The following fee(s)	are submitted:				•		
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. (Check No. 19968)							
Publication Fee (P Advance Order -	Payment by credit card. Form PTO-2038 is attached.						
Advance Order -	# of Copies	The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50 - 2222 (enclose an extra copy of this form).					
_ ` `	itus (from status indicated is SMALL ENTITY statu	,	☐ b. Applicant is no	longer claiming	SMALLEN	FITY status See 37 C	FR 1 27(a)(2)
NOTE: The Issue Fee an	d Publication Fee (if requ	ired) will not be accepte	d from anyone other tha				he assignee or other party in
interest as snown by the	records of the United Sta		Office.				
Authorized Signature Tau Cull.			Date November 14, 2008				
Typed or printed name Kamran Emdadi			Registration No. 58,823				
This collection of inform an application. Confiden	nation is required by 37 C tiality is governed by 35	FR 1.311. The information U.S.C. 122 and 37 CFR	on is required to obtain 1.14. This collection is	or retain a bene estimated to ta	fit by the pub	lic which is to file (and to complete, including	d by the USPTO to process)
submitting the complete this form and/or suggest	d application form to the ions for reducing this bur	USPTO. Time will vary den, should be sent to th	depending upon the in e Chief Information Of	dividual case. ficer, U.S. Pate	Any comment nt and Traden	is on the amount of ti mark Office, U.S. Dep	and you lie OSF1O to process, and gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,
Box 1450, Alexandria, V Alexandria, Virginia 223	/irginia 22313-1450. DO 313-1450.	NOT SEND FEES OR	COMPLETED FORMS	TO THIS AD	DRESS. SEN	D TO: Commissioner	for Patents, P.O. Box 1450

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.